

SPA3 QIC Meeting
Wednesday, March 21, 2012

- I. Welcome and Introductions
- II. Review of Minutes for February 2012

Attendance

Aronoff, Misty	Hua, Lihn	Santos, Gloria
Bazikyan, Adrine	Law, Judy	Schiada, Dustin
Casabella, Andrea	Luna-Perez, Windy	Schneider, Stephanie
de Keyser, Rebecca	Majors-Stewart, Natalie	Shrager, Leslie
Ekizian, Gassia	McClendon, Veronica	Sullivan, Stephanie
Emadi, Makan	Owens, Elizabeth	Taylor Stark, Melody
Fierro, Claudia	Park-Nakashima, Ellen	Tchakmakjian, Greg
Gomez, Irma	Pham, Lorna	Vermilion, Adri
Gonzalez, Rocio	Randle, Paula	Wilkerson, Kameelah
Gonzalez, Patricia	Robles, Manny	Winata, Ari
Hernandez, Michelle		

Quality Improvement – Melody Taylor Stark

Cultural Competency

- Brought back under Quality Improvement
- Plan link to DMH site – go over and review points that are looked at by DMH. If you work for a contract agency, good topics to springboard.
- Forms still being processed and field tested. Work with Cultural Competency to make sure readable.
- Particular questions regarding if a clinician is not familiar with consumer's culture. Linda Gamulin will present at the next Service Area 3 Providers meeting will do a presentation regarding translation and interpretation. A reminder will go out next week.

Cultural Competency – Next Meeting

April 11th, **1:30 3:30**

695 S. Vermont Avenue, 15th Floor Glass Conference Room

Contact: Sandra Chang-Ptasinski

(213) 251-6815

SChang@dmh.lacounty.gov

Clinical Issues – Office of the Medical Director (OMD) Report

Two items being addressed by overall Quality Improvement Work Plan – please review.

The document was recently emailed as an attachment by Greg Tchakmakjian. If you did not receive the email, let Greg know.

New Policy

Management of Aggressive Consumers

Agency staffs need to be trained on evaluation of overall clinic operations and procedures. Code systems should be in place so that everyone is safe as possible and issues are addressed as quickly as possible. Additionally, Security Guards must be trained to deal with consumers.

Consultation Parameters (indirect/direct consultation)

DMH is moving forward with collaboration and integration. Contract Providers will either adopt a policy or mimic the parameters of the Directly Operated clinics, or consult with their legal department.

Quality Improvement Implementation Reports

Co-occurring disorders – healthcare reform moving forward. MHSA funds will be addressing co-occurring disorders – information in the handout about where we are. Summary of findings/action needed and requested. MHP continues to contract with UCLA. When you Google it, there is a lot of information and links (some low cost training.) Melody Taylor Stark has the link if you want, email her and she will forward the link.

Addressing how Substance Abuse/Dependence issues exaggerates mental illness - how substance abuse impacts functional impairments. Make sure that Substance Abuse/Dependence is not the primary diagnosis, but still need to indicate how it impacts their mental illness.

QI Work Plan Status Report on COD – Currently in progress and the recommendation on the table is all MHSA funded programs have a requirement to integrate mental health and substance abuse for consumers in need of services.

Medication Support Services and where it is headed is mentioned. Much of the information has already been released in 2011. Summary of findings: Updates are posted on DMH websites.

CAEORO – review set for April 16, 2012

Quality Assurance – Gassia Ekizian

Announcements

Quality Assurance and Program Review/Certification Unit is moving to 695 Vermont, 15th Floor.

Audits/Reviews

- ✓ Residential Behavioral Services
- ✓ Five Acres – going through Auditor Control Audit
- ✓ Pilot program mix of residential and Wrap services.
- ✓ Hathaway Sycamores – happening now - no current information
- ✓ Hillside (future)

Documentation/Trainings

First training: April 9th – 10:30 – 5:00pm – the hope was to invite Quality Assurance Co-Chairs and Managers. Location: 600 Commonwealth Avenue, Los Angeles. Space is limited due to size of conference room.

Para Professional Labs - attempt is to have one or two labs. Directly Operated agencies services are now available. Future services for Contract Providers.

For those agencies that would like to enhance Mental Health Rehabilitation Specialist (MHRS) intervention techniques, please review the Wrap Around PowerPoint presentation on the DMH website. Go to the Main DMH site under Providers Information – documentation trainings online. There is much information regarding good documentation standards and practices.

Quality Assurance Technical Assistance and Training

5010 Update – NPI check results have concluded much focus on individual providers. Also, NPI numbers need to be reviewed for correct data information. All data has to match. Even things such as provider location, e.g., example: location of Avenue versus Ave. – everything has to match. If you have 2 suites and only one suite is listed, that becomes a problem because both need to be listed. If using electronic system, it needs to match up with what DMH has on file.

IS 280 Report - available April 2, 2012, will show you the name and reporting unit within the Provider Directory. It is recommended to have someone look at the Legal Entity Agreement. The Exhibit lists all organization sites. Let the lead contract monitor for SPA3 know if changes are needed. The person who gets the NPI number should know how to access the agency registry.

Discussion

Questions and Answers

MAT providers: a question came up regarding appropriate use for the new H0032 for MAT DCFS Summary of Findings meetings. Answer: DMH is researching and will let us know.

Group names for Groups – Do they have to be clinical?

Example: Tuesday Bowling Group

Answer: There is no particular protocol for group names but keep it to something that will be necessary for a mental health focus, for example: If an auditor is reviewing a chart and happens to see a progress note for *The Bowling Group*, they may associate the name with the group.

A question was asked about ratio of group members to facilitators. Answer: No mention of any in the guidelines. Some agencies consider 2 consumers a group. If one person doesn't show up, it becomes individual therapy. Whatever works for the agency, but be watchful for what may become an issue – example: two service providers and 2 or 3 group members.

Quality Assurance Issues to Watch For:

DMH is putting together an audit tool for Directly Operated agencies that is currently in the pilot stage. Contractors can also use for reference. Not sure what the tool will cover as it is being tested. For medications the focus will likely be whether or not the psychiatrist explained the side effects – not much focus on whether or not the medications are appropriate.

DMH will be doing training for Directly Operated chart reviewers. The contract liaison will be involved with these trainings. DMH wants a shared understanding that everyone is onboard with these trainings.

Emailing Guidelines – Directly Operated

Announcement

Healthy Ways LA Providers Meeting
Tuesday, March 27th, 1:00 – 4:00
St. Annes

Service Area 3 Meeting
Agenda
AB3632 – and Translation
April 5th 1:30 – 3:30
Spirit Agency
2000 Tyler Avenue
South El Monte
Parking on site and an overflow across

Brochures

Community Voices – DMH
Transformations – MHSA is Changing Lives in Los Angeles

SPA3 QIC Meeting was dark in April 2012.

Next Meeting: May 16th, 2012 at ENKI, 3208 Rosemead Blvd., 2nd Floor, El Monte, CA 91731. Telephone: (626) 227-7014.

